



# Public Records Request Form

CITY OF WHEATLAND  
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This public records request form is provided for the public's convenience and for the City's administrative tracking purposes. The City of Wheatland is committed to providing prompt access to public records, consistent with the requirements of the California Public Records Act (Government Code Section 6250 et seq.).

**TO BE COMPLETED BY THE REQUESTOR:**

NAME: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**REQUESTED DOCUMENTS/INFORMATION** (PLEASE BE AS SPECIFIC AS POSSIBLE. LIST EACH DOCUMENT SEPARATELY):

☐ Provide Print Copy

☐ View Documents Only

**PLEASE TELL US HOW YOU WOULD LIKE THE CITY TO RESPOND TO YOUR REQUEST:**

☐ Walk-In/Personal Pick-up ☐ Fax ☐ Email ☐ Other \_\_\_\_\_

**THANK YOU FOR YOUR INTREST IN OUR CITY RECORDS. YOU WILL BE CONTACTED WHEN THE INFORMATION IS READY.**

**FOR INTERNAL USE ONLY**

**REQUEST RECEIVED**

Date Request Received: \_\_\_\_\_ Time: \_\_\_\_\_ Respond By: \_\_\_\_\_ Assigned to: \_\_\_\_\_

**TIME**

Time Spent: \_\_\_\_\_ Time Spent Assisting Requestor (SB 90 reimbursement): \_\_\_\_\_

**REQUEST COMPLETED**

Date Completed: \_\_\_\_\_ Date Released: \_\_\_\_\_ Released By: \_\_\_\_\_

**FEES**

Copy cost (.25 cents per page): \_\_\_\_\_ Postage (if any): \_\_\_\_\_ Total due: \_\_\_\_\_